$_{B201B\;(Form\;2}\text{Case}_{18}, 18\text{-}00929$

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Document Page 1 of 56 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

| IN RE: | Case No |
|---------------------------------------|------------|
| Armstrong, Dwayne & Armstrong, Yvette | Chapter 13 |
| Debtor(s) | • |

| | b) OF THE BANKRUPTCY CODE | |
|---|---|--|
| Certificate of [Non- | Attorney] Bankruptcy Petition Preparer | |
| I, the [non-attorney] bankruptcy petition preparer signification notice, as required by § 342(b) of the Bankruptcy Code | • | red to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition P Address: | petition prepar the Social Seci principal, resp | y number (If the bankruptcy rer is not an individual, state urity number of the officer, onsible person, or partner of y petition preparer.) |
| x | | 1 U.S.C. § 110.) |
| Signature of Bankruptcy Petition Preparer of officer, pr partner whose Social Security number is provided abov | * * * * * * * * * * * * * * * * * * * | |
| C | ertificate of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received a | nd read the attached notice, as required by § 342(b) |) of the Bankruptcy Code. |
| Armstrong, Dwayne & Armstrong, Yvette | X /s/ Dwayne Armstrong | 1/12/2018 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X /s/ Yvette Armstrong | 1/12/2018 |
| · · · · · · · · · · · · · · · · · · · | Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Northern District of Illinois, Eastern Division

IN RE:

Armstrong, Dwayne & Armstrong, Yvette

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors _____24

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: January 12, 2018

/s/ Dwayne Armstrong
Debtor

/s/ Yvette Armstrong

Joint Debtor

Americash Loans, LLC c/o Migdal Law Group, LLP PO Box 64600 Chicago, IL 60664-0600

Barclays Bank Delaware PO Box 8803 Wilmington, DE 19899-8803

Capital One 15000 Capital One Dr Richmond, VA 23238-1119

Comenity Bank/Fashbug PO Box 182272 Columbus, OH 43218-2272

Comenity Bank/Kay Jewelers PO Box 182272 Columbus, OH 43218-2272

Cumulus PO Box 845817 Los Angeles, CA 90084-5817

Fortivap/Mabtc/Atls 5 Concourse Pkwy Atlanta, GA 30328-5350 Golden Valley Lending 635 E State Highway 20 Upper Lake, CA 95485-8793

Kay Jewelers
375 Ghent Rd
Fairlawn, OH 44333-4601

Lendingusa 15303 Ventura Blvd Ste 850 Sherman Oaks, CA 91403-6630

Marinr Finc 8211 Town Center Dr Nottingham, MD 21236-5904

Merrick Bank Corp PO Box 9201 Old Bethpage, NY 11804-9001

Ocwen Loan Servicing L 1661 Worthington Rd West Palm Beach, FL 33409-6488

Onemain PO Box 1010 Evansville, IN 47706-1010 Oppity Fin 11 E Adams St Chicago, IL 60603-6301

PLS Financial Solutions of Illinois, Inc 2904 Ogden Ave Aurora, IL 60504-7202

Prosper Marketplace In 101 2nd St Fl 15 San Francisco, CA 94105-3672

Quick Click Loans 3440 Preston Ridge Rd Ste 100 Alpharetta, GA 30005-3822

Rise 4150 International Plz Fort Worth, TX 76109-4892

Spot Loan 914 Chief Little Shell St NE Belcourt, ND 58316

Syncb/lowes PO Box 965005 Orlando, FL 32896-5005 Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

US Bank 4325 17th Ave S Fargo, ND 58125-6200

US Bank PO Box 5227 Cincinnati, OH 45201-5227

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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|-----------------------|--|--|--|
| | , | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu | e the name that is on government-issued ire identification (for nple, your driver's | Dwayne First name | Yvette First name |
| | | ise or passport). | Middle name | Middle name |
| | Bring iden with | g your picture tification to your meeting the trustee. | Armstrong Last name and Suffix (Sr., Jr., II, III) | Armstrong Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | de your married or den names. | | |
| 3. | you num Indi | the last 4 digits of r Social Security aber or federal vidual Taxpayer stification number | xxx-xx-0987 | xxx-xx-0956 |

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Debtor 1 Debtor 2

Armstrong, Dwayne & Armstrong, Yvette

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | | ■ I have not used any business name or EINs. Business name(s) EINs | ■ I have not used any business name or EINs. Business name(s) EINs | | |
| 5. | Where you live | 1617 N Latrobe Ave | If Debtor 2 lives at a different address: | | |
| | | Chicago, IL 60639-4301 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |

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Debtor 1 Debtor 2

Armstrong, Dwayne & Armstrong, Yvette

| 7. | The chapter of the Bankruptcy Code you are | | | rief description of each, see <i>No</i> the top of page 1 and check the | | | § 342(b) for Individual | s Filing for Bankruptcy (Form | | |
|---------------------------|---|--------------|----------------------------------|---|------------------------------|---|--|----------------------------------|--|--|
| | choosing to file under | ☐ Chapter 7 | | | | | | | | |
| | | □ Chapter 11 | | | | | | | | |
| | | ☐ Chap | oter 12 | | | | | | | |
| | | ■ Chap | oter 13 | | | | | | | |
| 8. | How you will pay the fee | ab If | out how you | entire fee when I file my petition. Please check with the clerk's office in your local court for more details u may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. y is submitting your payment on your behalf, your attorney may pay with a credit card or check with a | | | | | | |
| | | | | | | this option, sign a | n, sign and attach the Application for Individuals to Pay Th | | | |
| | | | • | nstallments (Official Form 103) t my fee be waived (You may | , | his ontion only if w | ou are filing for Chapte | r 7. Ry law a judge may but | | |
| | | no yo | ot required to our family siz | o, waive your fee, and may do see and you are unable to pay the Chapter 7 Filing Fee Waived (C | so only if y ne fee in in | our income is less stallments). If you | than 150% of the office choose this option, you | ial poverty line that applies to | | |
| 9. Have you filed for No. | | | | | | | | | | |
| | bankruptcy within the last 8 years? | Yes. | | | | | | | | |
| | | | District | Northern District of Illinois - Eastern Divi | When | 7/21/11 | Case number | 10-53650 | | |
| | | | District | | _ When | | Case number | | | |
| | | | District | | _ When | | Case number | | | |
| 10. | Are any bankruptcy cases pending or being filed by | ■ No | | | | | | | | |
| | a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | | | |
| | | | Debtor | | | | Relationship to | /ou | | |
| | | | District | | _ When | | Case number, if | known | | |
| | | | Debtor | | | | Relationship to y | /ou | | |
| | | | District | | _ When | | Case number, if | known | | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ine 12. | - | | | | | |
| | 1 631461166 ! | ☐ Yes. | Has yo | our landlord obtained an eviction | on judgme | ent against you? | | | | |
| | | | | No. Go to line 12. | | | | | | |
| | | | | | | | | | | |

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| Debtor | 1 | |
|--------|---|--|
| Dahtar | 2 | |

Armstrong, Dwayne & Armstrong, Yvette

| Par | Report About Any Bus | sinesses ` | You Own as a Sole Proprie | etor | | | | |
|-----|---|---|---|--|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | | |
| | | ☐ Yes. | Name and location of business | | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if an | у | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it | | Number, Street, City, S | tate & ZIP Code | | | | |
| | to this petition. | | Check the appropriate I | box to describe your business: | | | | |
| | | | ☐ Health Care Bus | siness (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | ☐ Single Asset Re | al Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | ☐ Stockbroker (as | defined in 11 U.S.C. § 101(53A)) | | | | |
| | | | ☐ Commodity Brol | ker (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | ☐ None of the abo | ve | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines operation | s. If you indicate that you are | e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure in 11 | | | | |
| | For a definition of small | ■ No. | I am not filing under Ch | apter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapte Code. | er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | | |
| | | ☐ Yes. | I am filing under Chapte | er 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| Par | t 4: Report if You Own or | Have Any | Hazardous Property or A | ny Property That Needs Immediate Attention | | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of | | | | | | | |
| | imminent and identifiable hazard to public health or | — 100. | What is the hazard? | | | | | |
| | safety? Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | rishable goods, or estock that must be fed, Where is the property? a building that needs ent repairs? | | | | | | |
| | | | | Number, Street, City, State & Zip Code | | | | |

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Debtor 1 Debtor 2

Armstrong, Dwayne & Armstrong, Yvette

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Debtor 2

Armstrong, Dwayne & Armstrong, Yvette

| 16. | What kind of debts do | 16a. | Are your debts primarily consu | mer debts? Cons | umer debts are | e defined in 11 U.S.C.§ 101(8) as "incurred by an | | | |
|-----|--|---|--|-----------------------------------|------------------------------------|--|--|--|--|
| | you have? | | individual primarily for a personal, | family, or househol | d purpose." | | | | |
| | | | ☐ No. Go to line 16b. | | | | | | |
| | | | ■ Yes. Go to line 17. | | | | | | |
| | | 16b. | Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | | |
| | | 16c. | State the type of debts you owe that | at are not consume | er debts or busir | ness debts | | | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter 7. G | o to line 18. | | | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | I am filing under Chapter 7. Do you paid that funds will be available to | | | roperty is excluded and administrative expenses are | | | |
| | administrative expenses | | □ No | | | | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | ☐ Yes | | | | | | |
| 18. | How many Creditors do | ■ 1-49 | | 1 ,000-5,000 | , | □ 25,001-50,000 | | | |
| | you estimate that you owe? | □ 50-99 | | 5001-10,000 | | 5 0,001-100,000 | | | |
| | | ☐ 100-1 ☐ 200-9 | | □ 10,001-25,0 | ☐ 10,001-25,000 ☐ More than100,000 | | | | |
| | | — 200-9 | 99 | | | | | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$ | | 1 \$1,000,001 | | □ \$500,000,001 - \$1 billion | | | |
| | be worth? | | 01 - \$100,000 | □ \$10,000,001 □ \$50,000,001 | | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | | |
| | | | 001 - \$500,000 001 - \$1 million | □ \$100,000,001 □ \$100,000,00 | | | | | |
| 20. | How much do you | □ \$0 - \$ | 50,000 | □ \$1,000,001 · | - \$10 million | □ \$500,000,001 - \$1 billion | | | |
| | estimate your liabilities to be? | □ \$50,0 | 001 - \$100,000 | □ \$10,000,001 | - \$50 million | □ \$1,000,000,001 - \$10 billion | | | |
| | | | 001 - \$500,000 | □ \$50,000,001 □ \$100,000,00 | | | | | |
| | | □ \$500, | 001 - \$1 million | — \$100,000,00 | | m | | | |
| Par | :7: Sign Below | | | | | | | | |
| For | you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. | | | | | | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | | |
| | | case can | | | | ey or property by fraud in connection with a bankruptc both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Armstrong | | | |
| | | Dwayne | e Armstrong e of Debtor 1 | | Yvette Arm Signature of D | nstrong | | | |
| | | Executed | on <u>January 12, 2018</u> MM / DD / YYYY | | Executed on | January 12, 2018 MM / DD / YYYY | | | |

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Debtor 1 Debtor 2

Armstrong, Dwayne & Armstrong, Yvette

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ G Paul McFarling | Date | January 12, 2018 |
|--|---------------|-----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| | | |
| G Paul McFarling | | |
| Printed name | | |
| Attorneys Serving You, LLC | | |
| Firm name | | |
| | | |
| 1701 S 1st Ave Ste 202 | | |
| Maywood, IL 60153-2400 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (700) 244 4567 | Email address | nmoforling@ocylow.com |
| Contact phone (708) 344-4567 | | pmcfarling@asylaw.com |
| 6244669 | | |
| Bar number & State | | |

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|--|---|---|---|---|-------------------------------------|------------|---|
| Fill in this info | ormation to identify | your case and thi | | | | | |
| Debtor 1 | Dwayne Arm | | | | | | |
| Debtor 2 (Spouse, if filing) | First Name Yvette Arms First Name | strong | e Name e Name | Last Name Last Name | | | |
| United States | Bankruptcy Court for | the: NORTHER | N DISTRICT OF ILLIN | NOIS, EASTERN DIVISION | ĺ | | |
| Case number | | | | | | Г | ☐ Check if this is an |
| | | | | - | | L | amended filing |
| Schedun each category hink it fits best. nformation. If m Answer every qu | . Be as complete and a nore space is needed, a uestion. | coperty escribe items. List a accurate as possible attach a separate sh | e. If two married people | n asset fits in more than one care filing together, both are ed top of any additional pages, w | ually responsible | for supply | ying correct |
| No. Go to I | , , , . | itable interest in ar | ny residence, building, l | land, or similar property? | | | |
| 1.1 1617 N | Latrobe Ave | | What is the property Single-family h | nome | the amount of any | secured c | ns or exemptions. Put claims on <i>Schedule D:</i> |
| Street addre | ess, if available, or other des | cription | Condominium | or cooperative | Creditors who Hav | ⁄e Claims | Secured by Property. |
| Chicago | o IL | 60639-4301 | ☐ Manufactured ☐ Land | or mobile home | Current value of t entire property? | I | Current value of the portion you own? |
| City | State | ZIP Code | ☐ Investment pro☐ Timeshare | operty | \$132,000 | | \$132,000.00 |
| | | | Other | in the property? Check one | | ole, tenan | r ownership interest cy by the entireties, or |
| Cook | | | Debtor 2 only | | | | |
| County | | | ■ Debtor 1 and D At least one of | Debtor 2 only f the debtors and another | Check if this (see instructions | | unity property |
| | | | Other information yo property identification | ou wish to add about this item, on number: | such as local | | |
| | | | Debtors' Reside | | | | |
| | | | | | | | |
| | | | | om Part 1, including any en | | | \$132,000.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

| Debtor Debtor | A rmotrona | | oc 1 Filed 01/12/18 Document mstrong, Yvette | 8 Entered 01/3 Page 15 of 56 | 12/18 13:20:29 6 Case number (if known) | Desc Main |
|------------------|--|---|---|---------------------------------|---|--|
| | - | etors, sport utility | y vehicles, motorcycles | | | |
| | | | , 100.0,0.0, 0.00 | | | |
| | | | | | | |
| ■ Ye | es . | | | | | |
| | Make: Chevrol | et | Who has an interest in t | the property? Check one | the amount of any | ured claims or exemptions. Put secured claims on <i>Schedule D</i> : |
| | Model: Impala Year: 2015 | | Debtor 1 only | | Creditors Who Ha | ve Claims Secured by Property. |
| | Year: 2015 Approximate mileage: | 2000 | Debtor 2 only □ Debtor 1 and Debtor 2 | 2 only | Current value of entire property? | the Current value of the portion you own? |
| | Other information: | | At least one of the del | | | , |
| | | | Check if this is come (see instructions) | munity property | \$26,000 | .00 \$26,000.00 |
| | have attached for | Part 2. Write that | u own for all of your entries f at number here | | | \$26,000.00 |
| Do you | own or have any | legal or equitable | e interest in any of the follow | ving items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | , , , , , | | ens, china, kitchenware | | | |
| Y | es. Describe | | | | | |
| | | Various hou | usehold goods, furniture | , fixtures and electr | ronics | \$4,000.00 |
| ■ N | <i>mpl</i> es: Televisions a including ce | | video, stereo, and digital equipr as, media players, games | ment; computers, printer | s, scanners; music collec | tions; electronic devices |
| Exai | collections, | l figurines; paintinç memorabilia, colle | gs, prints, or other artwork; boo ectibles | oks, pictures, or other art | t objects; stamp, coin, or l | paseball card collections; other |
| ЦΥ | es. Describe | | | | | |
| Exai | instruments | | e, and other hobby equipment; b | picycles, pool tables, golf | clubs, skis; canoes and | kayaks; carpentry tools; musical |
| ■N | es. Describe | | | | | |
| 10. Fire | earms | es, shotauns ama | nunition, and related equipme | nt | | |
| ■ N | | , : : : : : : : : : : : : : : : : : : : | , | | | |

| Debtor 1 | Case 18- | | | Docu | ıment | Entere Page 16 | | 13:20:29 umber (if known) | Desc Main |
|--|---|--------------|---------------------------|-------------|-----------------|-------------------|-------------------|---------------------------|---|
| Debtor 2 | | Dwayne | a Aillistioi | ig, i vette | | | Case III | umber (ii known) | |
| 11. Clothe : <i>Exam</i> µ ☐ No | s p <i>les:</i> Everyday clo | othes, furs, | leather coats, | designer w | ear, shoes, ad | ccessories | | | |
| Yes. | Describe | | | | | | | | 4400.00 |
| | | Norma | compleme | ent of clo | thing | | | | \$400.00 |
| □ No ´ | y <i>bl</i> es: Everyday jev Describe | | me jewelry, en | | | | | nes, gems, gold, | silver \$400.00 |
| | | | | | | | | | |
| Examp No Yes. 14. Any oth | rm animals bles: Dogs, cats, l Describe her personal and Give specific info | d househo | ld items you | did not alı | ready list, ind | cluding any h | nealth aids you | did not list | |
| | | | | | | | | | |
| | the dollar value 3. Write that nun | • | | | • | • | pages you have | e attached for | \$4,800.00 |
| Part 4: De | scribe Your Finan | cial Assets | | | | | | | |
| Do you ow | vn or have any l | egal or equ | uitable intere | st in any o | f the followir | ng? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | oles: Money you h | | - | | | | and when you file | e your petition | |
| | | | ther financial a | | | | | , brokerage hous | ses, and other similar |
| □ No ■ Yes | | | | | Institution n | name: | | | |
| | | 17.1. | Checking A | Account | BMO Har | ris - Check | ing | | \$50.00 |
| | | 17.2. | Savings A | ccount | Acme Cre | edit Union - | - Savings | | \$25.00 |
| | , mutual funds, o oles: Bond funds, | | | | efirms, money | / market acco | unts | | |
| ☐ Yes | | I | nstitution or is | suer name | : | | | | |
| | ublicly traded strenture | ock and in | terests in inc | orporated | and unincor | porated bus | inesses, includi | ng an interest i | n an LLC, partnership, and |
| ☐ Yes. | Give specific inf | | bout them e of entity: | | | | % of o | wnership: | |

Case 18-00929 Doc 1 Filed 01/12/18 Entered 01/12/18 13:20:29 Desc Main Page 17 of 56 Document Debtor 1 Armstrong, Dwayne & Armstrong, Yvette Case number (if known) Debtor 2 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

| | | Case 18-00929 | Doc 1 | Filed 01/12/18 Document | Entered 01/12/18 1 Page 18 of 56 | 3:20:29 Desc Main | |
|-----|---------------------------|---|-------------------------------|----------------------------|---|----------------------------------|------------|
| | btor 1 btor 2 | Armstrong, Dwayne | & Armstro | | · · | ber (if known) | |
| _ | | sts in insurance policies ples: Health, disability, or life | insurance; he | alth savings account (H | SA); credit, homeowner's, or rente | r's insurance | |
| ı | Yes. | Name the insurance compar Com | ny of each poli pany name: | cy and list its value. | Beneficiary: | Surrender o value: | or refund |
| | | | n life insur ender valu | ance - no cash e | | | \$0.00 |
| ı | If you a died. No | terest in property that is do are the beneficiary of a living Give specific information | | | d rance policy, or are currently entit | ed to receive property because s | omeone has |
| ı | Exam _l ■ No | s against third parties, whe ples: Accidents, employment. Describe each claim | | | or made a demand for paymer to sue | nt | |
| ļ | No | contingent and unliquidate Describe each claim | ed claims of e | every nature, including | counterclaims of the debtor a | nd rights to set off claims | |
| I | No | nancial assets you did not Give specific information | already list | | | | |
| 36. | | the dollar value of all of yo 4. Write that number here | | | y entries for pages you have a | ttached for | \$75.00 |
| Par | t 5: De | escribe Any Business-Related | Property You | Own or Have an Interest | n. List any real estate in Part 1. | | |
| | • | own or have any legal or equi | table interest i | n any business-related p | operty? | | |
| _ | _ | o to Part 6. Go to line 38. | | | | | |
| Par | | escribe Any Farm- and Commo | | | n or Have an Interest In. | | |
| 46. | ■ No. | u own or have any legal or . Go to Part 7. s. Go to line 47. | equitable int | erest in any farm- or c | ommercial fishing-related prop | erty? | |
| Par | t 7: | Describe All Property You | Own or Have a | ın Interest in That You Di | l Not List Above | | |
| | | u have other property of ar ples: Season tickets, country | | | | | |
| | | Give specific information | | | | _ | |
| 54. | Add t | the dollar value of all of yo | ur entries fro | om Part 7. Write that n | ımber here | | \$0.00 |

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known)

Document Debtor 1 Armstrong, Dwayne & Armstrong, Yvette

Debtor 2 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$132,000.00 56. Part 2: Total vehicles, line 5 **\$26,00**0.00 57. Part 3: Total personal and household items, line 15 \$4,800.00 58. Part 4: Total financial assets, line 36 \$75.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... 62. \$30,875.00 Copy personal property total \$30,875.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$162,875.00

Official Form 106A/B Schedule A/B: Property page 6

| | Case 18-00929 Doc 1 | . Filea 01/12/1 Document | | Entered 01/12/18 13:20 Page 20 of 56 | 0:29 Desc Main |
|---------------------------|---|---|------------------------------|---|---|
| Fil | Il in this information to identify your case: | | | | |
| De | ebtor 1 Dwayne Armstrong | | | | |
| | | Middle Name | L | ast Name | |
| | bouse if, filing) First Name | Middle Name | L | ast Name | |
| Un | nited States Bankruptcy Court for the: NOR | THERN DISTRICT OF | ILLING | OIS, EASTERN DIVISION | |
| | ase number | | | | ☐ Check if this is an amended filing |
| O | fficial Form 106C | | | | |
| S | chedule C: The Prope | rty You Cla | im | as Exempt | 4/16 |
| pro _l out | as complete and accurate as possible. If two maperty you listed on <i>Schedule A/B: Property</i> (Officiand attach to this page as many copies of <i>Part 2</i> (wn). | cial Form 106A/B) as yo | ur sou | irce, list the property that you claim a | s exempt. If more space is needed, fill |
| spe app fun to a | r each item of property you claim as exempt, ecific dollar amount as exempt. Alternatively blicable statutory limit. Some exemptions—sids—may be unlimited in dollar amount. How a particular dollar amount and the value of the blicable statutory amount. | , you may claim the fu such as those for healt vever, if you claim an | ıll fair th aid: exemp | market value of the property beir s, rights to receive certain benefit ption of 100% of fair market value | ng exempted up to the amount of any is, and tax-exempt retirement under a law that limits the exemption |
| Pa | Identify the Property You Claim as E | exempt | | | |
| 1. | Which set of exemptions are you claiming? | ? Check one only, even | if you | r spouse is filing with you. | |
| | You are claiming state and federal nonbank | ruptcy exemptions. 11 | U.S.C | . § 522(b)(3) | |
| | ☐ You are claiming federal exemptions. 11 U | .S.C. § 522(b)(2) | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | mpt, f | ill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| De | ebtor 1 Exemptions | | | | |
| | 1617 N Latrobe Ave | \$132,000.00 | | \$30,000.00 | 735 ILCS 5/12-901 |
| | Chicago IL, 60639-4301 County: Cook Line from Schedule A/B 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Chevrolet | \$26,000.00 | • | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| | Impala 2015 | - | | 100% of fair market value, up to | |
| | 20000 Line from Schedule A/B 3.1 | | | any applicable statutory limit | |
| | Various household goods, furniture, | \$4,000.00 | | \$4,000.00 | 735 ILCS 5/12-1001(b) |
| | fixtures and electronics | | | | |

\$400.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$400.00

735 ILCS 5/12-1001(a)

Line from Schedule A/B: 6.1

Line from Schedule A/B: 11.1

Normal complement of clothing

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| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the exemption you claim | Specific laws that allow exemption |
|----|--|--------------------------------------|--------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Miscellaneous jewelry and watches of limited value | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B: 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | BMO Harris - Checking Line from Schedule A/B 17.1 | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | Acme Credit Union - Savings | \$25.00 | | \$25.00 | 735 ILCS 5/12-1001(b) |
| | Elle Helli Goriedale / V.Z. 1112 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 to 2007) | | | on or after the date of adjustment.) | |
| | ■ No | | | | |
| | ☐ Yes. Did you acquire the property covered | I by the exemption within | า 1,21 | 5 days before you filed this case? | |
| | □ No | | | | |
| | ☐ Yes | | | | |

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| | | | Doddinone | • | ago 22 0. 00 | | |
|--------------------|-----------------------------------|---|---|----------------------|---|-------------|------------------------------------|
| Fil | l in this in | formation to identify your case | : : | | | | |
| De | btor 1 | | | | | | |
| | | First Name | Middle Name | L | ast Name | } | |
| | btor 2 ouse if, filing) | Yvette Armstrong First Name | Middle Name | L | ast Name | | |
| | | Bankruptcy Court for the: N | ORTHERN DISTRICT OF | | | | |
| C- | و ما مدیده م | | | | | 1 | |
| | ise numbei :nown) | | | | | | Check if this is an amended filing |
| Oí | fficial f | Form 106C | | | | | |
| | | ule C: The Prop | erty You Cla | im | as Exempt | | 4/16 |
| propout | perty you lis | sted on Schedule A/B: Property (| Official Form 106A/B) as yo | ur sou | r, both are equally responsible for supurce, list the property that you claim a ary. On the top of any additional pages | s exempt. I | f more space is needed, fill |
| fun to a app | ds—may ba particular plicable sta | oe unlimited in dollar amount. r dollar amount and the value of atutory amount. entify the Property You Claim a | However, if you claim an eof the property is determines | exemplexemplexemples | s, rights to receive certain benefit otion of 100% of fair market value o exceed that amount, your exemp | under a la | w that limits the exemption |
| 1. | Which se | et of exemptions are you claim | ing? Check one only, even | if you | r spouse is filing with you. | | |
| | You are | e claiming state and federal nonb | ankruptcy exemptions. 11 l | U.S.C | . § 522(b)(3) | | |
| | ☐ You are | e claiming federal exemptions. 1 | 1 U.S.C. § 522(b)(2) | | | | |
| 2. | For any p | property you list on Schedule | A/B that you claim as exer | npt, f | ill in the information below. | | |
| | | ription of the property and line on A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific I | laws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| De | Brief desc | xemptions cription: Schedule A/B: | | | | | |
| | Line nom | GONGGAIG TVD. | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | | claiming a homestead exempti o adjustment on 4/01/19 and eve | | | I on or after the date of adjustment.) | | |
| | ■ No | | | | . , | | |
| | ☐ Yes. | Did you acquire the property cov | ered by the exemption withir | า 1,21 | 5 days before you filed this case? | | |
| | | No | | | | | |
| | | Yes | | | | | |

Entered 01/12/18 13:20:29 Case 18-00929 Doc 1 Filed 01/12/18 Desc Main Page 23 of 56 Document Fill in this information to identify your case: Debtor 1 **Dwayne Armstrong** Middle Name Last Name Debtor 2 **Yvette Armstrong** Middle Name First Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property?

| _ | is form to the court with your other schedules. You h | ave nothing else to re | port on this form. | |
|--|---|--|--|--------------------------|
| Yes. Fill in all of the information b | pelow. | | | |
| Part 1: List All Secured Claims | recurs there are accounted along list the available appropriately | Column A | Column B | Column C |
| | more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Ocwen Loan Servicing L | Describe the property that secures the claim: | \$91,198.00 | \$132,000.00 | \$0.00 |
| Creditor's Name | 1617 N Latrobe Ave, Chicago, IL 60639-4301 | | | |
| 1661 Worthington Rd West Palm Beach, FL 33409-6488 | Debtors' Residence As of the date you file, the claim is: Check all that apply. ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or secu | red | | |
| Debtor 2 only | car loan) | | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mortgage | | | |
| Date debt was incurred 2006-09 | Last 4 digits of account number 8474 | | | |
| 2.2 US Bank | Describe the property that secures the claim: | \$26,000.00 | \$26,000.00 | \$0.00 |
| Creditor's Name | 2015 Chevrolet Impala | | | |
| PO Box 5227 | As of the date you file, the claim is: Check all that | | | |
| Cincinnati, OH | apply. | | | |
| 45201-5227 | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secu | red | | |
| Debtor 2 only | car loan) | 100 | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | | loney Security | | |
| Date debt was incurred 2015-05 | Last 4 digits of account number 0753 | | | |

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| Debtor 1 | Dwayne Arm | strong | | Case number (f know) |
|------------|---------------------|-------------------------------|---------------------------------|----------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Yvette Arms | trong | | |
| | First Name | Middle Name | Last Name | |
| | | | | |
| | | | | |
| Add the do | ollar value of your | entries in Column A on thi | s page. Write that number here: | \$117,198.00 |
| | ne last page of you | ir form, add the dollar value | e totals from all pages. | \$117,198.00 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | Out | DC 10 00020 DC | Docume | nt Page 2! | 5 of 56 | 20 000 | o mani |
|---------------------------------------|--|---|---|---|---|--|--|
| Fill in | this informa | ation to identify your cas | | 1 7 7 7 . | | | |
| Debto | r 1 | Dwayno Armetrone | • | | | | |
| DCDIO | | Dwayne Armstrong First Name | Middle Name | Last Name | | | |
| Debto | r 2 | Yvette Armstrong | | | | | |
| (Spouse | e if, filing) | First Name | Middle Name | Last Name | | | |
| United | d States Banl | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EAST | ERN DIVISION | | |
| | number | | | | | | |
| (if know | n) | | | | | _ | heck if this is an |
| | | | | | | aı | nended filing |
| Offic | ial Form | 106E/F | | | | | |
| Sche | edule E/ | F: Creditors Wh | o Have Unsecu | red Claims | | | 12/15 |
| ny exe schedu): Cred he Cor | ecutory contra le G: Executo litors Who Ha | acts or unexpired leases the ory Contracts and Unexpire we Claims Secured by Prop ge to this page. If you have | at could result in a claim. d Leases (Official Form 10 erty. If more space is nee | Also list executory co 06G). Do not include a ded, copy the Part yo | art 2 for creditors with NONF ontracts on Schedule A/B: Pr iny creditors with partially se u need, fill it out, number the at Part. On the top of any add | roperty (Officia ecured claims to entries in the | Form 106A/B) and on hat are listed in Schedule boxes on the left. Attach |
| Part 1 | : List All | of Your PRIORITY Unse | cured Claims | | | | |
| 1. Do | any creditor | s have priority unsecured of | laims against you? | | | | |
| | No. Go to Pa | rt 2. | | | | | |
| | Yes. | | | | | | |
| Part 2 | List All | of Your NONPRIORITY | Jnsecured Claims | | | | |
| 3. Do | any creditor | s have nonpriority unsecur | ed claims against you? | | | | |
| | No. You have | e nothing to report in this part | Submit this form to the cou | ırt with your other sche | dules. | | |
| | Yes. | | | | | | |
| un | secured claim | , list the creditor separately for | r each claim. For each clair | n listed, identify what ty | holds each claim. If a credito /pe of claim it is. Do not list clai three nonpriority unsecured cla | ims already inclu | ided in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | America | sh Loans, LLC | Last 4 digits | of account number | 2212 | | unknown |
| | | Creditor's Name | When wee 4 | a daht inaumad? | | | |
| | PO Box | al Law Group, LLP | when was ti | ne debt incurred? | | | |
| | | , IL 60664-0600 | | | | | |
| | | eet City State Zlp Code | As of the da | te you file, the claim i | s: Check all that apply | | |
| | _ | red the debt? Check one. | | | | | |
| | Debtor 1 | only | ☐ Continger | nt | | | |
| | ■ Debtor 2 | 2 only | ☐ Unliquida | ted | | | |
| | Debtor 1 | and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least | one of the debtors and anoth | er Type of NON | IPRIORITY unsecured | l claim: | | |
| | ☐ Check in | f this claim is for a commu | nity Student lo | oans | | | |
| | debt Is the claim | subject to offset? | ☐ Obligation report as price | | ration agreement or divorce that | at you did not | |
| | ■ No | | ☐ Debts to p | pension or profit-sharing | g plans, and other similar debts | S | |
| | ☐ Yes | | Other. Sp | ecify | | | |
| | | | | | | | |

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| Debto Debto | Armetrana Diversa 9 Armetrana | , Yvette | Case number (f know) | |
|----------------|--|------------------------------------|---|------------|
| 4.2 | Barclays Bank Delaware | Last 4 digits of account number | 6127 | \$1,503.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | 2014-11 | |
| | PO Box 8803 | | 2017 11 | |
| | Wilmington, DE 19899-8803 | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. ☐ Debtor 1 only | _ | | |
| | _ | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Revolving | account | |
| 4.3 | Barclays Bank Delaware | Last 4 digits of account number | 9112 | \$1,499.00 |
| 1.0 | Nonpriority Creditor's Name | | | ψ1,499.00 |
| | | When was the debt incurred? | 2014-11 | |
| | PO Box 8803 | | | |
| | Wilmington, DE 19899-8803 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | 7.0 0 | er chook an mat apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Revolving | account | |
| 4.4 | Capital One | Last 4 digits of account number | 6027 | \$2,752.00 |
| | Nonpriority Creditor's Name | _ | | ΨΞ,: σΞ:σσ |
| | 45000 0 1/4 10 0 | When was the debt incurred? | 2016-08 | |
| | 15000 Capital One Dr Richmond, VA 23238-1119 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | - | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Revolving | account | |

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Debtor 1 Debtor 2 Armstrong, Dwayne & Armstrong, Yvette Case number (if know) 4.5 Last 4 digits of account number **Capital One** 8000 \$2,337.00 Nonpriority Creditor's Name When was the debt incurred? 2012-01 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Revolving account ☐ Yes 4.6 Capital One Last 4 digits of account number \$490.00 5394 Nonpriority Creditor's Name When was the debt incurred? 2016-08-06 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Revolving account 4.7 Comenity Bank/Fashbug Last 4 digits of account number 3844 \$949.00 Nonpriority Creditor's Name When was the debt incurred? 2009-02 PO Box 182272 Columbus, OH 43218-2272 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Revolving account

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| | | | . |
|--|---|--|----------|
| Cumulus Nonpriority Creditor's Name | Last 4 digits of account number | 9511 | \$51 |
| Honphority Oreator 3 Name | When was the debt incurred? | 2017-06-26 | |
| PO Box 845817 | | | |
| Los Angeles, CA 90084-5817 Number Street City State Zlp Code | As of the date you file, the claim | s. Chack all that annly | |
| Who incurred the debt? Check one. | As of the date you me, the claim | S. Officer all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | , | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Installment | account | |
| Fortivap/Mabtc/Atls | Last 4 digits of account number | 3375 | \$2,45 |
| Nonpriority Creditor's Name | When was the debt incurred? | 2016-02 | |
| 5 Concourse Pkwy | mon was the dest mountain. | 2010-02 | |
| Atlanta, GA 30328-5350 | _ | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| _ | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d alaim. | |
| At least one of the debtors and another | Student loans | J Claim. | |
| ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | ration agreement of divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Installment | account | |
| Golden Valley Lending | Last 4 digits of account number | | unkr |
| Nonpriority Creditor's Name | | | |
| 635 E State Highway 20 | When was the debt incurred? | | |
| Upper Lake, CA 95485-8793 | | | |
| Number Street City State ZIp Code | As of the date you file, the claim | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | 3 | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | | | |

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| Armstrong, Dwayne & Armstrong | , rvette | Case number (if know) | |
|--|---|--|------------|
| Kay Jewelers | Last 4 digits of account number | 0760 | \$2,535.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | 2015-12 | |
| 375 Ghent Rd Fairlawn, OH 44333-4601 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | |
| Debtor 1 only | Пол | | |
| Debtor 1 only Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Uniiquidated ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| _ | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | <u>_</u> | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐Yes | Other. Specify Revolving | account | |
| Lendingusa | Last 4 digits of account number | 0312 | \$9,546.00 |
| Nonpriority Creditor's Name | - When we the debt incomed? | 2046.06.44 | · |
| 15303 Ventura Blvd Ste 850 Sherman Oaks, CA 91403-6630 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim i | 2016-06-14 s: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | i ciaim: | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | g plans, and other similar debts | |
| ■ No □ Yes | | • | |
| ⊒ Tes | Other. Specify Installment | account | |
| Marinr Finc Nonpriority Creditor's Name | Last 4 digits of account number | 4113 | \$3,098.0 |
| | When was the debt incurred? | 2017-08-15 | |
| 8211 Town Center Dr | | | |
| Nottingham, MD 21236-5904 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ ves | Other Specify Installment | account | |

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| Armstrong, Dwayne & Armstrong, Yvette | | Case number (f know) | | | | |
|---|---|---|-------------|--|--|--|
| Merrick Bank Corp | Last 4 digits of account number | 5882 | \$1,917.00 | | | |
| Nonpriority Creditor's Name | When was the debt incurred? | 2012-09 | | | | |
| PO Box 9201 DId Bethpage, NY 11804-9001 Jumber Street City State Zlp Code | As of the date you file, the claim | | | | | |
| Who incurred the debt? Check one. | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| Check if this claim is for a community | Student loans | | | | | |
| lebt s the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | |
| Yes | Other. Specify Revolving | account | | | | |
| Merrick Bank Corp | Last 4 digits of account number | 2466 | \$1,301.00 | | | |
| Nonpriority Creditor's Name | When was the debt incurred? | 2012-09 | | | | |
| PO Box 9201 | | | | | | |
| Old Bethpage, NY 11804-9001 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Yes | Other. Specify Revolving | account | | | | |
| Onemain | Last 4 digits of account number | 9259 | \$11,091.00 | | | |
| Nonpriority Creditor's Name | | | , | | | |
| PO Box 1010 Evansville, IN 47706-1010 | When was the debt incurred? | 2015-05 | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa | | | | | |
| ■ No | report as priority claims Debts to pension or profit-sharin | | | | | |
| | · | | | | | |
| Yes | Other Specify Installment account | | | | | |

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| Oppity Fin | Last 4 digits of account number | 3583 | \$2,89 |
|---|---|---|--------------|
| Nonpriority Creditor's Name | When was the debt incurred? | | , |
| 11 E Adams St | When was the debt incurred? | 2017-07-13 | |
| Chicago, IL 60603-6301 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| Is the claim subject to offset? | Obligations arising out of a separe report as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Installmen | t account | |
| Oppity Fin | Last 4 digits of account number | 4629 | \$1,904 |
| Nonpriority Creditor's Name | When was the debt incurred? | 2017 07 22 | |
| 11 E Adams St | when was the debt incurred? | 2017-07-22 | |
| Chicago, IL 60603-6301 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharir | or plans, and other similar debts | |
| Yes | ■ Other. Specify Installmen | | |
| | — Other. Specify | | |
| PLS Financial Solutions of Illinois, Inc | Last 4 digits of account number | 01CD | unkno |
| Nonpriority Creditor's Name | - | | |
| 2004 Onder Ave | When was the debt incurred? | | |
| 2904 Ogden Ave Aurora, IL 60504-7202 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify | | |

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| Prosper Marketplace In | Last 4 digits of account number | 4088 | \$6,9 |
|--|--|--|-------|
| Nonpriority Creditor's Name | When was the debt incurred? | 2015-12 | |
| 101 2nd St FI 15 | when was the dept incurred? | 2013-12 | |
| San Francisco, CA 94105-3672 | _ | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. □ Debtor 1 only | | | |
| _ | Contingent | | |
| ■ Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | 1.1. | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community debt | ☐ Student loans | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Installment | account | |
| Prosper Marketplace In | Last 4 digits of account number | 6029 | \$6,5 |
| Nonpriority Creditor's Name | | | |
| 101 2nd St Fl 15 | When was the debt incurred? | 2016-10 | |
| San Francisco, CA 94105-3672 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Installment | | |
| | | | |
| Quick Click Loans Nonpriority Creditor's Name | Last 4 digits of account number | | unk |
| p. 1000 o ramo | When was the debt incurred? | | |
| 3440 Preston Ridge Rd Ste 100 | | | |
| Alpharetta, GA 30005-3822 Number Street City State Zlp Code | As of the date you file, the claim i | s. Check all that apply | |
| Who incurred the debt? Check one. | As or the date you me, the Cidilli I | S. Oncox an trial apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| • | report as priority claims | a plane, and other circular debts | |
| No No | Debts to pension or profit-sharin | g pians, and other similal debts | |
| □Yes | Other. Specify | | |

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| Debto Debto | Armetrena Diversa 9 Armetrena | , Yvette | Case number (f know) | |
|----------------|---|--|--|------------|
| 4.23 | Rise | Last 4 digits of account number | 2974 | \$3,666.00 |
| | Nonpriority Creditor's Name | | 2017-04-10 | |
| | 4150 International PIz Fort Worth, TX 76109-4892 | | | _ |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Installment | account | _ |
| 4.24 | Rise | Last 4 digits of account number | 1686 | \$3,598.00 |
| | Nonpriority Creditor's Name | | 2047.05.00 | |
| | 4150 International Plz | When was the debt incurred? | 2017-05-09 | _ |
| | Fort Worth, TX 76109-4892 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | | ration agreement or divorce that you did not | |
| | No | report as priority claims Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | | | |
| | ☐ Yes | Other. Specify Installment | account | _ |
| 4.25 | Spot Loan Nonpriority Creditor's Name | Last 4 digits of account number | | unknown |
| | Nonphonty Creditor's Name | When was the debt incurred? | | |
| | 914 Chief Little Shell St NE Belcourt, ND 58316 | | | _ |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | a plane, and other similar dabta | |
| | ■ No | Debts to pension or profit-sharin | y pians, and other similar debts | |
| | ☐ Yes | Other. Specify | | _ |

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| Debto Debto | r 1 r 2 Armstrong, Dwayne & Armstrong | , Yvette | Case number (if know) | |
|----------------|--|--|--|------------|
| 4.26 | Syncb/lowes | Last 4 digits of account number | 3499 | \$415.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | 2017-06 | |
| | PO Box 965005 | | 2011 00 | |
| | Orlando, FL 32896-5005 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Revolving | account | |
| 4.27 | Td Bank USA/Targetcred | Last 4 digits of account number | 1165 | \$2,409.00 |
| | Nonpriority Creditor's Name | _ | | ΨΞ, 100100 |
| | PO Box 673 | When was the debt incurred? | 2015-05 | |
| | Minneapolis, MN 55440-0673 | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Revolving | account | |
| 4.28 | US Bank | Last 4 digits of account number | 4562 | \$9,987.00 |
| | Nonpriority Creditor's Name | _ | | ψο,σοι 1σσ |
| | 4325 17th Ave S | When was the debt incurred? | 2016-07 | |
| | Fargo, ND 58125-6200 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | , o auto , ou o, o c | or chook all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | | |
| | ☐ Yes | ■ Other. Specify Revolving | account | |

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Debtor 1 Armstrong, Dwayne & Armstrong, Yvette Case number (if know) Debtor 2 4.29 **US Bank** Last 4 digits of account number 0195 \$1,989.00 Nonpriority Creditor's Name When was the debt incurred? 2016-07 4325 17th Ave S Fargo, ND 58125-6200 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Revolving account ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Comenity Bank/Kay Jewelers Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 182272 Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218-2272 Last 4 digits of account number 0760 Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** 6a. **Domestic support obligations** 6a. 0.00 Total claims Taxes and certain other debts you owe the government from Part 1 6b. 0.00 6b. 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Drianity Add lines Co through Cd

| Total claims | |
|---------------|--|
| TOTAL CIAILIS | |
| from Part 2 | |

| 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
|------------|--|------------|----------|-------------------|
| 6f. | Student loans | 6f. | \$ | Total Claim |
| 6g. 6h. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6g. 6h. | \$ | 0.00 |
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ \$ | 0.00 82,342.00 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 82,342.00 |

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| | | DOGUILLE | <u>III — Paue 30 01 30</u> | |
|---------------------|--------------------------|-------------------|----------------------------|--------|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Dwayne Armstro | ng | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Yvette Armstron | g | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIV | VISION |
| Case number _ | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the , Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|----|-----------|--------------|--|---------------------|---|
| .1 | | Name, Number | , Street, City, State and ZIF | Code | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| .2 | Name | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | | | | | |
| .3 | City | | State | ZIP Code | |
| | Name | | | | _ |
| | | | | | |
| • | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| .4 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | | Gueer | | | |
| | City | | State | ZIP Code | |
| .5 | Name | | | | <u> </u> |
| | | | | | |
| • | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |

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| | | Docume | nt Page 37 of | <u>56</u> |
|------------------------|--|---|-----------------------------|---|
| Fill in this | s information to identify you | r case: | | |
| Debtor 1 | Dwayne Armstr | ona | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Yvette Armstro | | | |
| Spouse if, fil | ling) First Name | Middle Name | Last Name | |
| Jnited Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN | DIVISION |
| Case num | nber | | | ☐ Check if this is an |
| | | | | amended filing |
| Officia | l Form 106H | | | |
| Sched | dule H: Your Co | debtors | | 12/15 |
| re filing t nd numb | ogether, both are equally res | sponsible for supplying co n the left. Attach the Additi | rrect information. If more | mplete and accurate as possible. If two married people space is needed, copy the Additional Page, fill it out, n the top of any Additional Pages, write your name and |
| 1. Do | you have any codebtors? (I | f you are filing a joint case, do | not list either spouse as a | codebtor. |
| ■ No | | | | |
| ☐ Ye | S | | | |
| | t hin the last 8 years, have yo rnia, Idaho, Louisiana, Nevad | | | Community property states and territories include Arizona, Visconsin.) |
| ■ No | . Go to line 3. | | | |
| | s. Did your spouse, former spo | use or legal equivalent live w | ith you at the time? | |
| | o. Dia your opoaco, roinior opo | aco, or logal oquivalorit live w | ar you at the time. | |
| line 2 | again as a codebtor only if a particular point of the control of the column 1: Your codebtor | that person is a guarantor on 106E/F), or Schedule G (C | or cosigner. Make sure ye | our spouse is filing with you. List the person shown in ou have listed the creditor on Schedule D (Official Form Schedule D, Schedule E/F, or Schedule G to fill out Column 2: The creditor to whom you owe the debt |
| | Name, Number, Street, City, State and | 1 ZIP Code | | Check all schedules that apply: |
| 3.1 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | Number Street | | | |
| | City | State | ZIP Code | |
| 3.2 | | | | Cabadula D. lina |
| J.Z | Name | | | ☐ Schedule D, line ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | | | | |
| | Number Street City | State | ZIP Code | |

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| Fill | in this information to | identify your cas | se: | | | | | | | | | |
|--------------------|---|-------------------------------------|--|------------------------------|-------------------------------------|--|----------------|--|---|----------------------|--|---------------|
| Del | btor 1 | Dwayne Arm | strong | | | | _ | | | | | |
| 1 | btor 2 buse, if filing) | Yvette Armst | rong | | | | _ | | | | | |
| Uni | ited States Bankrupt | cy Court for the: | NORTHERN DISTRIC | CT OF ILLIN | IOIS, EASTE | RN | | | | | | |
| (If kr | se number | 4001 | | - | | | | □ A □ A | | ed filing ent sho | 3 wing postpetition ollowing date: | chapter 13 |
| | fficial Form chedule I: \ | | | | | | | N | 1M / DD/ \ | /YYY | _ | |
| sup spo atta | plying correct infor use. If you are sepa ch a separate sheet | mation. If you a trated and your | ole. If two married peop re married and not filin spouse is not filing wit n the top of any additio | ig jointly, a h you, do r | nd your spou ot include in | use is Iforma | livin ation | g with y about y | ou, inclu | de info | rmation about y | our eeded, |
| 1. | Fill in your emplo information. | yment | | Debtor 1 | | | | | Debtor 2 | 2 or no | n-filing spouse | |
| | If you have more th attach a separate p information about | age with | Employment status | | ■ Employed □ Not employed Mechanic | | | | ■ Employed □ Not employed Accounts Receivable Rep | | | |
| | employers. | | Occupation | Mechar | | | | | | | | |
| | Include part-time, self-employed work | | Employer's name | Habetle | er Bowl, Inc | ; <u>. </u> | | | Gatewa | ay Fo | undation, Inc. | |
| | Occupation may in homemaker, if it ap | | Employer's address | | Northwest o, IL 60630 | | | 55 E Jackson Blvd Ste 1500 Chicago, IL 60604-4184 | | | 00 | |
| Par | rt 2: Give Deta | ails About Mont | How long employed the | here? | 10 years a | and 2 | mo | nths | | 7 year | s and 6 mont | hs_ |
| Esti | | me as of the dat | e you file this form. If y | ou have not | ning to report | for any | y line | , write \$0 |) in the sp | ace. In | clude your non-fil | ing spouse |
| | ou or your non-filing sp ce, attach a separate | | than one employer, coml | bine the info | rmation for all | emplo | oyers | for that p | oerson on | the line | es below. If you n | eed more |
| | | | | | | | | For Deb | otor 1 | | Debtor 2 or n-filing spouse | |
| 2. | | | , and commissions (be culate what the monthly | | | 2. | \$ | 5 | ,200.00 | \$_ | 3,118.31 | _ |
| 3. | Estimate and list | monthly overtin | ne pay. | | | 3. | +\$ | | 223.33 | +\$ | 0.00 | _ |
| 4. | Calculate gross II | ncome. Add line | 2 + line 3. | | | 4. | \$ | 5,42 | 23.33 | \$ | 3,118.31 | |

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| Debto | | Armstrong, Dwayne & Armstrong, Yvette | _ | Case | number (if known) | | | |
|-------|--------------------------|--|---------------------------|-------------------|----------------------------------|----------------------|--------------------------------|------|
| | Сор | y line 4 here | 4. | For | Debtor 1 5,423.33 | For Debtor | | |
| | · | all payroll deductions: | | · — | 0,120100 | | <u>,</u> | |
| | 5a. 5b. 5c. 5d. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans | 5a. 5b. 5c. 5d. | \$_ \$_ \$_ | 1,282.32 0.00 0.00 0.00 | \$ \$ \$ \$ | 475.61 0.00 0.00 0.00 | |
| | 5e. 5f. 5g. 5h. | Insurance Domestic support obligations Union dues Other deductions. Specify: Employee Advance | 5e. 5f. 5g. 5h.+ | \$_ \$_ \$_ | 0.00 0.00 0.00 296.10 | | 0.00 0.00 0.00 | |
| | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ <u> </u> | 1,578.42 | \$ | 948.84 | |
| 8. | | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 7. 8a. | \$ <u></u> | 3,844.91 | \$ <u>2</u> | 0.00 | |
| | 8b. 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8b. | \$ \$ \$_ | 0.00 | \$ | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | 0.00 | |
| | 8e. 8f. | Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8e. 8f. | \$ \$ | 0.00 | \$ \$ | 0.00 | |
| | 8g. | Pension or retirement income | — 8g. | \$ | 0.00 | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | 0.00 | |
| | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | 3 | \$ <mark>,844.91</mark> + \$_ | 2,169.47 | = \$ 6,014 | 4.38 |
| | Incluothe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your dur friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avoirity: | ependen | | • | | +\$(| 0.00 |
| | | the amount in the last column of line 10 to the amount in line 11. The resile that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | \$6,014 | 4.38 |
| | Do y ■ | you expect an increase or decrease within the year after you file this form No. | ? | | | | Combined monthly incom | me |

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| Fill | in this informa | tion to identify you | ır case: | | | | | |
|-----------------------|--|---|-------------------------------|---|--|------------|--------------------|---|
| Deb | | | | | | Ch | eck if this is: | |
| DCD | 101 1 | Dwayne Arm | strong | | | | An amended filing | |
| Deb | tor 2 | Yvette Armst | rong | | | | A supplement show | ving postpetition chapter 13 |
| (Spc | ouse, if filing) | | | | | | expenses as of the | following date: |
| Unite | ed States Bankr | ruptcy Court for the: | | HERN DISTRICT OF ILLING RN DIVISION | OIS, | | MM / DD / YYYY | |
| 1 | e number nown) | | | | | | | |
| ∟ ∩f | fficial Fo | orm 106J | | | | | | |
| | | J: Your E | xpen | ses | | | | 12/1: |
| Be a info (if k | as complete a ormation. If m nown). Answ | and accurate as pore space is needer every question | oossible. ded, attac n. | If two married people are | | | | supplying correct ur name and case numbe |
| Pari | Is this a joir | ibe Your Househ t case? | iola | | | | | |
| •• | □ No. Go to | | | | | | | |
| | _ | s Debtor 2 live in | a sonara | ita housahold? | | | | |
| | _ | | a separe | ite ilouseilolu : | | | | |
| | ■ N □ Y | - | file Offici | al Form 106J-2,Expenses t | for Separate Househ | oldof Debt | or 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □No |
| | dependents | names. | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | _ | □ Yes □ No |
| | | | | | | | | ☐ Yes |
| 3. | Do your exp | enses include | | No | | | _ | |
| | | f people other tha d your dependen | an $_{\square}$ | Yes | | | | |
| exp | t 2: Estim | ate Your Ongoin | g Monthl ur bankru | y Expenses ptcy filing date unless yo is filed. If this is a supple | | | | |
| valu | | sistance and hav | | overnment assistance if yed it on Schedule I: Your I | | | Your exp | penses |
| 4. | The rental o | or home ownersh | ip expens | ses for your residence. In | clude first mortgage | | • | 955.04 |
| | payments an | d any rent for the o | ground or | lot. | | 4. | > | 855.64 |
| | If not includ | | | | | | | |
| | | estate taxes | | ********* | | 4a. | | 0.00 |
| | | rty, homeowner's, | | | | 4b. 4c. | · | 0.00 |
| | | maintenance, repowner's association | | | | 4c. 4d. | | 300.00 0.00 |
| 5. | | | | ur residence, such as hom | ne equity loans | 5. | · | 0.00 |

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| Debtor 1 Debtor 2 | Armstrong, Dwayne & Armstrong, Yvette | Case number (if known) | |
|------------------------|---|------------------------|--------------------------|
| 6. Utili t | ies: | | |
| 6a. | Electricity, heat, natural gas | 6a. \$ | 425.00 |
| 6b. | Water, sewer, garbage collection | 6b. \$ | 100.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 167.00 |
| 6d. | Other. Specify: Other | 6d. \$ | 193.00 |
| . Food | d and housekeeping supplies | 7. \$ | 650.00 |
| . Chile | dcare and children's education costs | 8. \$ | 0.00 |
| Clot | hing, laundry, and dry cleaning | 9. \$ | 200.00 |
| O. Pers | onal care products and services | 10. \$ | 120.00 |
| 1. Med | ical and dental expenses | 11. \$ | 200.00 |
| | sportation. Include gas, maintenance, bus or train fare. ot include car payments. | 12. \$ | 320.00 |
| 3. Ente | rtainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 146.00 |
| 1. Cha | ritable contributions and religious donations | 14. \$ | 0.00 |
| 5. Insu Do n | rance. ot include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. | Life insurance | 15a. \$ | 196.00 |
| 15b. | Health insurance | 15b. \$ | 0.00 |
| 15c. | Vehicle insurance | 15c. \$ | 178.00 |
| 15d. | Other insurance. Specify: | 15d. \$ | 0.00 |
| 6. Taxe Spec | es. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: | 16. \$ | 0.00 |
| | allment or lease payments: | • | |
| | Car payments for Vehicle 1 | 17a. \$ | 0.00 |
| | Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| | Other. Specify: | 17c. \$ | 0.00 |
| | Other. Specify: | 17d. \$ | 0.00 |
| | r payments of alimony, maintenance, and support that you did not repo | | 0.00 |
| | acted from your pay on line 5, Schedule I, Your Income (Official Form 10 prayments you make to support others who do not live with you. | ω, ψ | 0.00 |
| Spec | | 19. | 0.00 |
| | er real property expenses not included in lines 4 or 5 of this form or on 5 | | |
| | Mortgages on other property | 20a. \$ | 0.00 |
| 20b. | Real estate taxes | 20b. \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| | Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| 1. O the | er: Specify: | 21. +\$ | 0.00 |
| | · · · - | | |
| | ulate your monthly expenses | Φ. | 4.050.04 |
| | Add lines 4 through 21. | \$ | 4,050.64 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106 | | |
| 22c. | Add line 22a and 22b. The result is your monthly expenses. | \$ | 4,050.64 |
| 3. Calc | ulate your monthly net income. | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 6,014.38 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b\$ | 4,050.64 |
| | • • • | · | |
| 23c. | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. \$ | 1,963.74 |
| For e | ou expect an increase or decrease in your expenses within the year after xample, do you expect to finish paying for your car loan within the year or do you experication to the terms of your mortgage? O. | | or decrease because of a |
| ПΥ | | | |

| | | | | <u> </u> |
|---------------------------------|--|---------------------------|---|--|
| Fill in this inforr | mation to identify your | case: | | |
| Debtor 1 | Dwayne Armstro | ng | | |
| | First Name | Middle Name | Last Name | } |
| Debtor 2 (Spouse if, filing) | Yvette Armstron First Name | g Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISION | |
| Case number | | | | |
| (if known) | | _ | | Check if this is an amended filing |
| | | | | |
| Official Forr | m 106Dec | | | |
| | | an Individual | Debtor's Schedules | 12/15 |
| 200 10101 | | an marviadar | | 12/13 |
| obtaining money | | n connection with a bankr | or amended schedules. Making a false sta uptcy case can result in fines up to \$250, | |
| Sign | n Below | | | |
| Did you pa | y or agree to pay some | one who is NOT an attorn | ey to help you fill out bankruptcy forms? | , |
| ■ No | | | | |
| ☐ Yes. N | Name of person | | | Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119) |
| • | lty of perjury, I declare e true and correct. | that I have read the summ | nary and schedules filed with this declara | tion and |
| X /s/ Dwa | ayne Armstrong | | X /s/ Yvette Armstrong | |
| Dwayn | ne Armstrong | | Yvette Armstrong | |
| Signatu | re of Debtor 1 | | Signature of Debtor 2 | |
| Date . | January 12, 2018 | | Date | |

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| | 0430 10 00323 | Docume Docume | | | Jese Main |
|---|----------------------------|-------------------|------------------------------|---|------------------------------------|
| Fill in this i | nformation to identify you | r case: | | | |
| Debtor 1 | Dwayne Armstr | ong | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Yvette Armstro | ng | | | |
| Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVISIO | N | |
| Case numbo | er | | | | Check if this is an amended filing |
| | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | Your a | ssets |
|-----------------|---|--------------|------------------------|
| | | Value o | of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 132,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 30,875.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 162,875.0 |
| aı | rt 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 117,198.0 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F | \$ | 82,342.0 |
| | Your total liabilities | \$ | 199,540.00 |
| ^o ai | rt 3: Summarize Your Income and Expenses | | |
| ١. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I | \$ | 6,014.38 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,050.64 |
| Pai | rt 4: Answer These Questions for Administrative and Statistical Records | | |
| S . | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | ner schedu | les. |
| | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | ersonal, far | nily, or household |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo. | x and subr | nit this form to the |

court with your other schedules.

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Debtor 1
Debtor 2
Armstrong, Dwayne & Armstrong, Yvette

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____8,541.64

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | in this inform | nation to identify your | . 0250 | | | | | | |
|-------------------|---|--|--|---|---|---|--|--|--|
| | btor 1 | Dwayne Armstr | | | | | | | |
| | 5101 1 | First Name | Middle Name | Last Name | | | | | |
| | btor 2 ouse if, filing) | Yvette Armstron First Name | Niddle Name | Last Name | | | | | |
| | | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS, EASTERN DIV | SION | | | | |
| | | ., ., | | · | | | | | |
| | se number _ nown) | | | | - | heck if this is an mended filing | | | |
| St | | of Financial | Affairs for Individ | | | 4/10 | | | |
| info | rmation. If m | | | | qually responsible for supply additional pages, write your r | | | | |
| Pa | rt 1: Give I | Details About Your Ma | rital Status and Where You | Lived Before | | | | | |
| 1. | What is you | r current marital statu | s? | | | | | | |
| | ■ Married □ Not man | rried | | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | ■ No □ Yes. Lis | t all of the places you liv | red in the last 3 years. Do not i | nclude where you live now. | | | | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 there | lived Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | |
| 3. stat | | | | - | y property state or territory? o, Texas, Washington and Wis | | | | |
| | ■ No □ Yes. Ma | ike sure you fill out <i>Sch</i> e | edule H: Your Codebtors (Offi | cial Form 106H). | | | | | |
| Pa | rt 2 Explai | n the Sources of You | r Income | | | | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operating u received from all jobs and a lave income that you receive to | Il businesses, including part- | | ar years? | | | |
| | □ No ■ Yes. Fil | I in the details. | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$2,400.00 | ■ Wages, commissions, bonuses, tips | \$1,425.00 | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |

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Debtor 1
Debtor 2
Armstrong, Dwayne & Armstrong, Yvette
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Case number (if known)

| | | | | Deliterat | | D.L. | | | |
|----|--|---|---|--|---|---|----------------------------|---|--|
| | | | | Debtor 1 | Onese in active | Debtor 2 | | Gross income | |
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco | | (before deductions and exclusions) | |
| | r last calen anuary 1 to | dar year: December | 31, 2017) | ■ Wages, commissions, bonuses, tips | \$65,180.00 | ■ Wages, components, tips | missions, | \$37,676.93 | |
| | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | | |
| | | dar year be December | | ■ Wages, commissions, bonuses, tips | \$60,000.00 | ■ Wages, components | missions, | \$35,000.00 | |
| | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | | |
| 5. | Include inc other publi you are fili | come regard c benefit par ng a joint ca | less of wheth yments; pens se and you h | ne during this year or the two ner that income is taxable. Exam- sions; rental income; interest; div- ave income that you received to the prometry and the source separately | ples of other income are alim vidends; money collected from gether, list it only once under | n lawsuits; royalties; Debtor 1. | | | |
| | _ | Fill in the de | etails. | | | | | | |
| | | | | Debtor 1 | | Debtor 2 | | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inco Describe below. | ome | Gross income (before deductions and exclusions) | |
| Pa | rt 3: List | Certain Pa | yments You | ı Made Before You Filed for E | Bankruptcy | | | | |
| 6. | Are either ☐ No. | Neither De individual p | ebtor 1 nor I orimarily for a | e's debts primarily consumer Debtor 2 has primarily consult personal, family, or household | mer debts. Consumer debts purpose." | | S.C. § 101 | (8) as "incurred by an | |
| | | During the No. | • | ore you filed for bankruptcy, did | you pay any creditor a total of | \$6,425* or more? | | | |
| | | ☐ No. ☐ Yes | Go to line | r.each creditor to whom you paid | a total of \$6.425* or more in | one or more navmen | ite and the t | total amount you paid that | |
| | | | creditor. D | to not include payments for dor to an attorney for this bankrupto to on 4/01/19 and every 3 years | nestic support obligations, su y case. | uch as child support | and alimo | | |
| | Yes. | | | or both have primarily consu- ore you filed for bankruptcy, did | | \$600 or more? | | | |
| | | ■ No. | Go to line | 7. | | | | | |
| | | □ _{Yes} | payments | each creditor to whom you paid for domestic support obligations uptcy case. | | | | | |
| | Creditor' | s Name and | d Address | Dates of payme | nt Total amount paid | Amount you still owe | Was this | payment for | |
| 7. | <i>Insiders</i> in which you | clude your re are an office | elatives; any e er, director, p | r bankruptcy, did you make a general partners; relatives of an erson in control, or owner of 20 ^o prietor. 11 U.S.C. § 101. Include | y general partners; partnershi % or more of their voting secu | ps of which you are rities; and any mana | a general p aging agent | artner; corporations of , including one for a | |
| | ■ No | 1.5-4 | | | | | | | |
| | | List all paym Name and | nents to an in Address | Dates of payme | nt Total amount | Amount you | Reason f | or this payment | |

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| | btor 2 Armstrong, Dwayne & Armstron | g, Yvette | Cas | se number (if known) | | |
|-----|---|--|---|---|------------------------------------|-----------------------------|
| 8. | Within 1 year before you filed for bankruptc; insider? Include payments on debts guaranteed or cosign | | ments or transfer ar | ny property on acc | ount of a deb | t that benefited an |
| | ■ No □ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | this payment tor's name |
| Pa | rt 4: Identify Legal Actions, Repossessions | s, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury ca and contract disputes. | y, were you a party in an ases, small claims actions, | y lawsuit, court actidivorces, collection s | on, or administratiuits, paternity action | ive proceeding is, support or c | g? ustody modifications, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| 10. | Within 1 year before you filed for bankrupto: Check all that apply and fill in the details below | | erty repossessed, fo | reclosed, garnishe | ∍d, attached, s | seized, or levied? |
| | ■ No. Go to line 11.□ Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property Explain what happened | d | Date | | Value of the property |
| 11. | Within 90 days before you filed for bankrupt accounts or refuse to make a payment becar No Yes. Fill in the details. | cy, did any creditor, incl | | ancial institution, s | et off any amo | ounts from your |
| | Creditor Name and Address | Describe the action the | e creditor took | Date a | action was | Amoun |
| 12. | Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or an | | erty in the possessio | on of an assignee f | or the benefit | of creditors, a |
| | ■ No □ Yes | | | | | |
| Pa | rt 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift. | cy, did you give any gift | s with a total value o | of more than \$600 | per person? | |
| | Gifts with a total value of more than \$600 person | er Describe the gifts | | Dates the gi | you gave fts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | | |
| 14. | Within 2 years before you filed for bankrupte ■ No □ Yes. Fill in the details for each gift or contri | | s or contributions w | rith a total value of | more than \$6 | 00 to any charity? |
| | Gifts or contributions to charities that total more than \$600 Charity's Name | | u contributed | Dates contri | you ibuted | Value |
| | Address (Number, Street, City, State and ZIP Code) | | | | | |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust Description and value of the property transferred Date Transfer was made

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| | otor 1 | Armstrong, Dwayne & Armstron | a Yvette | Paye 49 C | _ | mbor (if Imaum) | | | |
|-----|---|--|--|---|-------------|---|---|--|--|
| Det | otor 2 | Amstrong, Dwayne & Amstron | g, i vette | | Case nui | mber (if known) | | | |
| Par | t 8: | List of Certain Financial Accounts, Ins | truments, Safe Deposi | t Boxes, and Sto | orage Units | S | | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | | |
| | | e of Financial Institution and ress (Number, Street, City, State and ZIP | Last 4 digits of account number | Type of acco | ount or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No | | | | | | | | |
| | | Yes. Fill in the details. | Who also had as | 4- 40 | Danasiha | the contents | Do way atill | | |
| | | e of Financial Institution ress (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, and ZIP Code) | | Describe | the contents | Do you still have it? | | |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | | to it? | to it? Address (Number, Street, City, State | | the contents | Do you still have it? | | |
| Par | t 9: | Identify Property You Hold or Control | for Someone Else | | | | | | |
| 23. | • | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | |
| | = : | No | | | | | | | |
| | ☐ Yes. Fill in the details. Owner's Name | | | Where is the property? (Number, Street, City, State and ZIP | | the property | Value | | |
| | Add | ress (Number, Street, City, State and ZIP Code) | Code) | , State and ZIP | | | | | |
| Par | t 10: | Give Details About Environmental Info | ormation | | | | | | |
| For | the pu | rpose of Part 10, the following definitio | ns apply: | | | | | | |
| | toxic | conmental law means any federal, state, substances, wastes, or material into the colling the cleanup of these substances. | e air, land, soil, surface | | • . | • | | | |
| | | neans any location, facility, or property operate, or utilize it, including disposal | - | environmental l | aw, whethe | er you now own, operate, | or utilize it or used to | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | | |
| Rep | ort all | notices, releases, and proceedings tha | t you know about, rega | ardless of when | they occur | rred. | | | |
| 24. | Has a | any governmental unit notified you that | you may be liable or p | otentially liable | under or in | n violation of an environr | mental law? | | |
| | | No | | | | | | | |

Name of site

Address (Number, Street, City, State and ZIP Code)

Environmental law, if you

know it

Governmental unit

Date of notice

Address (Number, Street, City, State and ZIP Code)

☐ Yes. Fill in the details.

Entered 01/12/18 13:20:29 Case 18-00929 Doc 1 Filed 01/12/18 Desc Main Page 50 of 56 Document Debtor 1 Armstrong, Dwayne & Armstrong, Yvette Case number (if known) Debtor 2 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Dwayne Armstrong /s/ Yvette Armstrong Yvette Armstrong **Dwayne Armstrong** Signature of Debtor 1 Signature of Debtor 2 Date January 12, 2018 **Date** January 12, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Certificate Number: 00301-ILN-CC-030414479



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>January 10</u>, 2018, at 8:03 o'clock <u>PM EST</u>, <u>DWAYNE ARMSTRONG</u> received from <u>InCharge Debt Solutions</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Illinois</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 10, 2018 By: /s/Pablo Minguela

Name: Pablo Minguela

Title: Certified Bankruptcy Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 00301-ILN-CC-030414480



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>January 10</u>, 2018, at <u>8:03</u> o'clock <u>PM EST</u>, <u>YVETTE ARMSTRONG</u> received from <u>InCharge Debt Solutions</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Illinois</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 10, 2018 By: /s/Pablo Minguela

Name: Pablo Minguela

Title: Certified Bankruptcy Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.